**FEC** 

## **STATEMENT OF**

FORM 1	ORGANIZA	ATION		
1 Olliwi 1	(See instructio	ns)		Office use only
NAME OF COMMITTEE (in	full) (Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
Friends of Fra	ank Guinta			
ADDRESS (number and	street) P.O. Box 877			
(Check if address is changed)	s			
	Manchester		LNH L	03105
		CITY	STATE	ZIP CODE 🛦
COMMITTEE'S E-MA	ALL ADDRESS (Please provide only one e-	mail address)		
(Check if address is changed)	s pam@teamguinta.co	om 		
		<u> </u>		
COMMITTEE'S WEB	PAGE ADDRESS (URL)	<b>~</b>		
(Check if address X is changed)	www.teamguinta.coi	m 		
0.4			1	
3. FEC IDENTIFICA	ATION NUMBER	C C00461350		
4. IS THIS STATEM	MENT NEW (N) OR	X AMENDED (A)		
I certify that I have exam	nined this Statement and to the best of my kno	wledge and belief it is true, correct an	d complete	
	Tressurer Pamela Smith			
Type or Print Name of	TreasurerFameia Simui			
Signature of Treasure	r Electronically Filed by Pamela Si	mith	Date 0 4	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of fa	alse, erroneous, or incomplete information may	y subject the person signing this State	·	
Ottica	7.141 STANGE IN IN STUMA			
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)